

4/10/07 Joe Wilson Federal Agent & Revelator
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CAMP PAGES TOWNSHIP, CA 94568

CV 07-5581 (2) JW
FR
Lead Case
CSC 06-1272

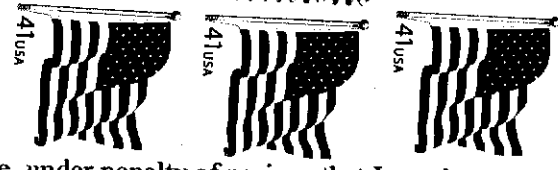
1 RAYMOND & SWEDE NELSON Pro Se
2 PRIVATE ATTORNEY GENERAL
3 5325 BRODER BLVD (C/O ARK-006)
4 DUBLIN, CA 94568

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

10 RAYMOND & SWEDE NELSON Pro Se
11 DQB 383
12 Behalf of Commander In Chief Plaintiff
13 G. BUSH & 15 Fed. Reserve Bank of Atlanta
14 WIKES FARBO, STAGE-KOOFY
15 aka CFO ATKINS
16 Western Union, Sargent Defendant
17 WIKES FARBO, STAGE-KOOFY
18 aka CFO ATKINS

CV 07-5581 JW
FR
CASE NO. CV 07-5582 JW
FR

PRISONER'S WHISLE BLOWER
APPLICATION TO PROCEED



123
Binding
Contract

18 I, NELSON, Ray & Swede declare, under penalty of perjury that I am the
19 Plaintiff in the above entitled case and that the information I offer throughout this application
20 is true and correct. I offer this application in support of my request to proceed without being
21 required to pay the amount of fees, costs or give security. I state that because of my
22 poverty not required
23 poverty I am unable to pay the costs of this action or give security, and that I believe that I am
24 entitled to relief.

In support of this application, I provide the following information:

25 1. Are you presently employed? ~~Yes~~ No X LOCATED (False Imprisonment)
26 If your answer is "yes," state both your gross and net salary or wages per month, and give the
27 name and address of your employer:
28

Gross: None Net: None

Employer: Lock Down 24-7, wheel chair Bound @ Guantanamo Bay
North West DUBLIN'S SARGENT RITA, DISCRIMINATED BLUE TO RED 4/5/50'S GREEN
Refused Testimony because of SPARKWAY VISA KREATOR'S
CRUBS USA, RAMP'S

WINDON & Nelson-Revelator A/G (707) 532-5971

9/14/07 Joe Weaver

CV 07-5581 (2) 1st
PR

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1 If the answer is "no," state the date of last employment and the amount of the gross and net
2 salary and wages per month which you received. (If you are imprisoned, specify the last
3 place of employment prior to imprisonment.)

4 Wind Carriers Drilling - Mining - Mfg - Rail Road - Pipe Lines
5 Rock Springs, Wyoming 80089 (307) 251-6446

6 Apple Trade Shows (925) 935-4332

7 2. Have you received, within the past twelve (12) months, any money from any of the
8 following sources:

9 a. Business, Profession or Yes X No
10 self employment

11 b. Income from stocks, bonds, Yes X No
12 or royalties?

13 c. Rent payments? Yes No X

14 d. Pensions, annuities, or Yes X No
15 life insurance payments? (But Was Paid By Sheriff Phummer/Alford)

16 e. Federal or State welfare payments, Yes X No

17 Social Security or other govern-
18 ment source? Disability, Rail Road Accident

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
20 received from each.

21 Self Employment \$6,500.00
IRAS 9.00
ANNUITIES 400.00 Wasted @ Felson Mail Room 15/17th Oct 07
22 SSI 700.00

23 3. Are you married? Widowed Yes X No

24 Spouse's Full Name: KRISTEN DAE (Samp) NELSON, deceased

25 Spouse's Place of Employment: Bone Orchard

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ None Net \$ None

28 4. a. List amount you contribute to your spouse's support: \$ 9200.00

9th Nov 7 Lee Haines
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- b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)

the WAYNES (ARE-765), Gordon-Hayes

the ATTACKER MURRAY HULLER, (BBR-611)

5. Do you own or are you buying a home? Yes ☐ No ☒

Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

6. Do you own an automobile? Yes ☒ No ☐

Make SEIZED, 2000 LAND ROVER 4x6/1 Year 2000 Model WYATT

Is it financed? Yes ☒ No ☐ If so, Total due: \$ \$11,600

Monthly Payment: \$ \$230.00

7. Do you have a bank account? Yes ☒ No ☐ (Do not include account numbers.)

Name(s) and address(es) of bank: Ed Ward JONES @ Rock Springs Wyoming

Present balance(s): \$ \$1000.00 Wanted 1st car @ Santa Rita, Min/ Room, ACSO

Do you own any cash? Yes ☒ No ☐ Amount: \$ \$101 Has a 1st car @ Santa Rita

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ☒ No ☐

Seized LAP TOP Computer & Welding - Minor ~ \$100,000.00

8. What are your monthly expenses?

Rent: \$ \$615.00 Utilities: \$600.00 Fuels

Food: \$ \$800.00 Clothing: \$12.00

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Acct.
US BANK	\$ 200	\$ 1,200.00
Wash Mart	\$ 100	\$ 800.00
Safeway	\$ 100	\$ 3,000.00
Rite Aid	50	600.00
Home Depot	200	4,000.00
Loews	200	2,000.00

DENVER SHERIFF DEPARTMENT
PERSONAL PROPERTY INVENTORYCV07-5581(2) ^{DSD 324 (2/96)}

BOOKING NUMBER: 155/691

PROPERTY BAG NUMBER: 20769

PRISONER NAME: NILSON, RAYMOND

DATE: 08-02-07

UPON ADMISSION THE ITEMS LISTED BELOW WERE RECEIVED FROM THE INMATE:
(INCLUDE ALL BAGS, BOXES AND SUITCASES)

QUANT.	ITEMS	CODE	DESCRIPTION	QUANT.	ITEMS	CODE	DESCRIPTION
	BRACELET	BRAC			WATCH	WTCH	W
	BILLFOLD	BLFD	BRN		KEYS	KEYS	W
	EARRING	EARR			BELT	BELT	BRN
	LIGHTER	LITR			RING	RING	
	NECKLACE	NECK			R/X	R/X	
	PURSE	PURS			OTHER	OTHR	
1	SUNDRIES	SUND	CELL		NONE	NONE	
	CHECKS	CHEX			CURRENCY		10500
1	GLASSES	GLAS	OK		COIN		2.19
	KNIFE	KNFE			TOTAL MONEY		107.19

SEARCH OFFICER

SERIAL NO. 01-57

BOOKING OFFICER

SERIAL NO. 0707

INMATE'S SIGNATURE: [Signature]

DATE: 8-2-07

UPON PRISONER'S RELEASE, ALL PERSONAL PROPERTY AS INVENTORIED ABOVE HAS BEEN RECEIVED BY THE INMATE

RELEASING OFFICER:

SERIAL NUMBER:

INMATE'S SIGNATURE:

DATE:

UPON RELEASE OF PROPERTY TO A THIRD PERSON, ALL PERSONAL PROPERTY AS INVENTORIED ABOVE WAS RELEASED TO

(NAME AND SIGNATURE OF PERSON RECEIVING PROPERTY)

DATE: 8-2-07 TIME: 1:00

FINANCE OFFICER:

SERIAL NUMBER:

UPON TRANSPORTATION TO ANOTHER JURISDICTION, ALL PERSONAL PROPERTY AS INVENTORIED ABOVE WAS RECEIVED BY

TRANSPORTING OFFICER:

SERIAL NUMBER:

TRANSPORTING JURISDICTION: P9018/50

DATE:

RECEIVING OFFICER:

SERIAL NUMBER: Page 5

9th Nov 07 Fee Waiver
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Arre4 Nelson - Deade Ak - EPA (704) 552-5991

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

Yes. MBA student CIPR Base \$55,000⁰⁰

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes No X

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

Conte v. Superior Ct #06-1272, Urgent & Conspiracy P. 182
wherein FOR JOURNAL (Yours H. 4.5F) Free Press M. Business
Fed Dist of Ind. Criminal Bush # CSA 02-391-5

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments ^{IF mandated} by the court.

CAMP FRANK is FEDERAL RESTORATION (Fed Restoration Exempted)
I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

9th Oct 07
DATE

Signature of Applicant
Redacted (ENTIRE) Solicitor General

Notp Accounting Sheriff ANTERN
Alameda County Supervisor Reuse Monetary Statements
Ms Hilda & Reuse / Unwilling & Complete
is Western Union Clerk? TRUST CERTIFICATION FOR
Redacted by 3 months in Disciplinary - Re-Volunteer
(704) 552-5991 FRAUD to Deny Due Process
EQUAL ACCESS to Justice

Arrested V. S. 07 "Suede" Journal Nelson
Camp Press Fed Restoration
Merritts Handheld County Sheriff #616
B.M. Free Supervisor Pilot
Yosemite & Anchorage

ON OR
PRINTS ONLY

CV 07-5581 (2) W/PC

The People of the State of California,)
Plaintiff,)
vs.)
DOUGLAS RAY NELSON)
Defendant.)

NO. H433662
DEPT. NO. 509
PFN: ARX006
DOB: 5/6/45
CII: 08528071

Lead Case CEC#1272
ARX006
050645
w/m

563-58-8335

ORDER DIRECTING SUBMISSION OF BLOOD AND SALIVA SAMPLES

The above-named defendant having been convicted of a violation of Section _____ of the Penal Code, IT IS ORDERED that said defendant submit two (2) blood samples and one (1) saliva sample for the purpose of GENETIC MARKER TYPING pursuant to Section 290.2 of the Penal Code.

The Alameda County Sheriff's Department is hereby ordered to comply with the sample collection procedures prescribed in 290.2 P.C. Such samples will be obtained in a medically approved manner.

If defendant is in custody, the sampling will take place as soon as possible, in time for defendant's next court appearance.

If defendant is out of custody at the time this order is issued, defendant will report to the Santa Rita Rehabilitation Center lobby with a copy of this order, Mondays, Tuesdays, or Wednesdays between the hours of 3:30 to 6:30 PM. In order to ensure time for sampling, out of custody offenders must appear by 5:30 PM. The Sheriff's Department will conduct the prescribed sample collection for all qualifying out of custody offenders at this place and time.

Defendant is: ☐ in custody ☐ out of custody.

The defendant is ordered to return to Court on _____ at _____, in Department No. _____ for _____.

Date

Judge of the Above-Entitled Court

Defendant appeared on 082907 and complied with the Order.

J. PIYAMANOTHAMKUL #1652
Name and Title of Person Certifying Under Penalty of Perjury

082907
Date

J. PIYAMANOTHAMKUL #1652
Signature

